UNITED STATES SECURITIES AND EXCHANGE COMMISSIOPROCESSED Washington, D.C. 20549

FORM D

SEP 182008

OMB APPROVAL OMB Number: 3235-0076 Expires: August 31, 2008 Estimated average burden hours per response.....16.00

SEC USE ONLY					
Prefix		Senal			
DAT	E RECE	VED			

NOTICE OF SALE OF SECURITIES THOMSON REUTERS SECTION 4(6), AND/OR

	UNIFORM LIMITED OFFERING	EXEMPTION	
	this is an amendment and name has changed, and indic in WPEF IV Feeder (Scotland) LP	cate change.)	· · · · · · · · · · · · · · · · · · ·
	at apply): Rule 504 Rule 505 Rule 506	Service 4(4) FLULOS	
Type of Filing: New Filing		Section 4(6) 📋 ULUE	
Type of Filing: 121 New Filing		UCATION DATA	The same and the same and the same and
7	A. BASIC IDENTIF	ICATION DATA	1 25 4 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
1. Enter the information reques			1 16 6 18 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
•—	s is an amendment and name has changed, and indicate	e change.)	LIBBAN BENDINGKA BENEDIDAK MENELINGKA BENDINGKA BENDINGKA
WPEF IV Feeder (Scotland) I Address of Executive Offices	(Number and Street, City, State, Zip Code)	T-lank and Mark to Controller	I THE PROPERTY OF THE PARTY OF
50 Lothian Road, Festival Squ		Telephone Number (including 0031 35 694 16 80	08059809
Edinburgh EH3 9WJ, Scotlan		0031 35 694 16 80	
	Operations (Number and Street, City, State, Zip Code)	Telephone Number (including	Area Code)
Brief Description of Business			GEO
Private investment fund.			956
Type of Business Organization			- Mail Processing -
corporation	⊠limited partnership, already formed		Section
_ ,		other (please specify):	
☐ business trust	☐limited partnership, to be formed	" ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	CED 4 0 2000
	Month Year		SEP + 0 2008
Actual or Estimated Date of Inc	orporation or Organization: 0 5 0 8	Actual Estimated	
Jurisdiction of Incorporation or	Organization: (Enter two-letter U.S. Postal Service ab	obreviation for State:	Melantina DC
	CN for Canada; FN for other i	foreign jurisdiction) F N	Washington, DC
GENERAL INSTRUCTIONS			1103
Federal: Who Must File: All issuers mak 77d(6).	ting an offering of securities in reliance on an exemption	on under Regulation D or Section 4(6), 17 CFI	R 230.501 et seq. or 15 U.S.C.
Exchange Commission (SEC) o	e filed no later than 15 days after the first sale of securi n the earlier of the date it is received by the SEC at the y United States registered or certified mail to that addr	address given below or, if received at that add	
Where to File: U.S. Securities a	nd Exchange Commission, 450 Fifth Street, N.W., Wa	ashington, D.C. 20549.	
	s of this notice must be filed with the SEC, one of wh ned copy or bear typed or printed signatures.	ich must be manually signed. Any copies not	manually signed must be

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (5/91)

A. BASIC IDENTIFICATION DATA
 Enter the information requested for the following: X Each promoter of the issuer, if the issuer has been organized within the past five years; X Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; X Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and X Each general and managing partner of partnership issuers.
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General Partner
Full Name (Last name first, if individual) WPEF IV Manager Limited
Business or Residence Address (Number and Street, City, State, Zip Code) Sarnia House, Le Truchot, St. Peter Port, Guernsey, Channel Islands
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Busines: or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
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Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(cs) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

						B. INFOR	RMATIO	N ABOU	T OFFEI	RING					
1.	Has the	issuer sol	d, or does t	he issuer in	tend to sell,	to non-acci	edited inve	stors in this	s offering?				••••••	Yes	No ⊠
					A	лswer also	in Appendi	ix, Column	2, if filing	under ULC)E.				
2.	What is the minimum investment that will be accepted from any individual? *Subject to the discretion of the General Partner								€ 5,000	000*					
3. 1	Does the offering permit joint ownership of a single unit?							Yes Ø	 No □						
i i	enune person five (5) only.	ration for or agent o persons to	solicitation f a broker o be listed a	of purchase or dealer reg are associate	person who ers in connect istered with ed persons o	tion with s the SEC ar	ales of secu nd/or with a	rities in the state or sta	offering. ites, list the	If a person name of the	to be listed te broker or	is an associated dealer. If i	iated more than		
MVisio	n Priv	ate Equit	rst, if indiv Advisors	Limited											
					treet, City, S n W1K 3NE		ode)								-
Name o	f A.sso	iated Bro	ker or Deal	er											
States in	n V/hic	h Person I	isted Has S	Solicited or	Intends to S	olicit Purch	aseis							 .	
(C	ha:k ".	All States	" or check i	ndividual S	tates)	•.•.		••••••				All States			
X	[AL] [[1]] [MT] [RI]	(AK) (IN) [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] (NH] [TN]	X [CA] {KY} [NJ] [TX]	[CO] [LA] [NM] [UT]	X [CT] [ME] X [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] {MA} (ND] (WA)	X [FL] [MI] [OH] [WV]	[GA] {MN} [OK] X [WI]	[HI] {MS} [OR] [WY]	(ID) (MO) (PA) (PR)		
Full Na	me (La	st name fi	rst, if indiv	idual)											
Busines	s or Re	sidence A	ddress (Nu	mber and S	treet, City, S	State, Zip C	ode)								-
Name o	f Alisoc	iated Bro	ker or Deal	ег										_	
States in	whic	h Person I	isted Has S	Solicited or	Intends to S	olicit Purch	asers								
(Check	"Al" St	ates" or cl	seck individ	iual States)			••					All States			
[!] [M [R	(T) []	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	(FL) [MI] (OH) (WV)	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
			rst, if indivi												
Busines	s or Re	sidence A	ddress (Nu	mber and S	treet, City, S	tate, Zip C	ode)								
Name o	f Assoc	iated Bro	ker or Deal	ег					<u> </u>					_	
States in	Which	n Person I	isted Has S	Solicited or	Intends to S	olicit Purch	asers						·		
(Check	"All St	ates" or cl	eck individ	lual States)		••••••				······		All States			
[11]	ST}	(AK) (IN) (NE) ISCI	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] {LA] [NM] (UT)	(CT) [ME] [NY) (VT)	[DE] (MD) (NC) [VA]	[DC] [MA] [ND] [WA]	(FL) (MI) (OH) (WV)	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	(ID) (MO) (PA) (PR)		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
i.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0' if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Sœurity	Aggregate Offering Price	Amount Already Sold
	Dest	5	s
	Equity	\$	S
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	S	s .
	Partnership Interests	\$ 1,025,459,716	\$ 1,025,459,716
	Other (Specify)		S
	Total	\$ 1,025,459,716*	\$ 1,025,459,716*
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	52	\$ 1,025,459,716*
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		S
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		S
	Rule: 504		s
	Total		s
١.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the lox to the left of the estimate.		
	Transfer Agent's Fees		s
	Printing and Engraving Costs		S
	Legal Fees	_ ⊠	\$ 137,500
	Accounting Fees		s
	Eng neering Fees		s
	Sales Commissions (specify finders' fees separately).	_ Ø	S 440,742*
	Other Expenses (identify)		s
	Total	×	\$ 578,242
		~~	G J / U 4474

^{*} Converted from Euros to USD. The conversion date was date of close, August 18, 2008.

 Enter the difference between the aggregate offering price given in response to Part C - Question I and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the 		
issuer."		\$ 1,024,881,474
Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b. above.		
	Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees	□ s	□s
Purchase of real estate	S	□s
Purchase, rental or leasing and installation of machinery and equipment	□ \$	□s
Construction or leasing of plant buildings and facilities	□ s	□ s
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	□s	□s
Repayment of indebtedness	□s	□s
Working capital.	□ s	□s
Other (specify): Investments in securities and activities and expenses necessary, convenient, or incidental creto.	□ s	⊠ \$ 1,024,881,474
Colurn Totals	□s	⊠ \$ 1,024,881,474
	M C I OI	4,881,474

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

Signature

Title of Signer (Print or Type)

Title of Signer (Print or Type)

Authorized Signatory of the General Partner of the Issuer

Authorized Signatory of the General Partner of the Issuer

Issuer (Print or Type) WPEF IV Feeder (Scotland) LP

Name of S. gner (Print or Type)

D. HUTCHINSON

Issuer (Print or Type)
WPEF IV Feeder (Scotland) LP

Name of Signer (Print or Type)

ATTENTION

END

Date

September 3,2008

September 3, 2008